PLATFORM FOR DECENTRALIZATION of healthcare and benefits administration

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Legal Disclaimers

What is Solve.Care Foundation?

Market challenge and opportunity

Inefficiency of healthcare administration

Current model of care coordination is complex, time consuming and frustrating

Solve.Care platform is a revolution of care, cost and convenience

Solve.Care platform functionality

Care.Wallet

Care.Card

Care.Coin

Care.Vault

Care.Protocol

Solve.Care platform is for all stakeholders

Clients can configure own Care Administration Networks

Different configurations of Care Administration Networks

Solve.Care platform Design

Solve.Care platform Architecture

Care.Protocol Design

Solve.Care is a platform of Care.Community

Care.Marketplace

Solve.Care platform revenue

SOLVE Token Distribution

Reserved Token Vesting Schedule

Use of Proceeds

SOLVE Tokens vs. Care.Coins

Solve.Care Product Roadmap

Governance

Care Administrative Network (SOLVE)Token

Leadership

Important Disclosures
Legal Disclaimer

The purpose of this White Paper is to present the CARE ADMINISTRATION NETWORK (CAN) token to potential token holders in connection with the proposed Early Adopter Sale and Open Sale. The token name of the company has been renamed as “SOLVE” from “CAN”. The token sale agreement has been amended on 22nd June, 2016 to reflect the change in the name of token. The information set forth below may not be exhaustive and does not imply any elements of a contractual relationship. Its sole purpose is to provide relevant and reasonable information to potential token holders in order for them to determine whether to undertake a thorough analysis of the company with the intent of acquiring SOLVE Tokens. Nothing in this White Paper shall be deemed to constitute a prospectus of any sort or a solicitation for investment, nor does it in any way pertain to an offering or a solicitation of an offer to buy any securities in any jurisdiction. This document is not composed in accordance with, and is not subject to, laws or regulations of any jurisdiction, which are designed to protect investors.

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The use of proceeds section in Whitepaper/Whitepaper is the best guess, but we should not be held liable for using proceeds not strictly as it is described in the use of proceeds sections. Tokens distributed during the Sale Period will constitute 50% of the total number of Tokens generated. Tokens will be allocated among the team, the community, the platform, and the foundation.

Due to the fact that our products are offered on the internet (meaning both the World Wide Web and the Ethereum Blockchain) we understand that there is a possibility that there might be a certain “flow back” of the Company’s products into the countries where Token sales are regulated by government or special legal requirements exist or Token sales are illegal.

If you are not sure whether it is legal for you to by tokens, please seek advice from your lawyers on the matter.

Please see also our Token Sale Agreement for a complete list of disclosures.
What is Solve.Care Foundation?

Solve.Care Foundation was established with the mission to decentralize and redefine administration of healthcare and other benefit programs, globally. Solve.Care aims to alter the way healthcare is conducted around the world – while generating attractive value for a wide range of stakeholders composed of consumers, insurers and service providers.

Solve.Care allows direct interaction among consumers, insurers and service providers to improve health care access, reduce costs and streamline payments, regardless of whether it’s a patient, employer, insurer or government agency making a healthcare payment. We are seeking to improve care outcomes through effective coordination and eliminate much of the cost of duplication, inefficiency, waste, abuse and fraud from the system.

By combining our deep domain expertise in health and human services, benefit administration and care coordination; with the latest advances in distributed ledger and distributed computing technology, we are able to design, build and launch a platform that will redefine healthcare for individuals, employers, providers, administrators, insurers and government agencies around the world.

The core of Solve.Care is grounded in the proven, tested advantages of applying blockchain technology – a distributed ledger approach utilized in real-time transactions – to a nation’s health care requirements.

OUR STATED AND PUBLISHED MISSION STATEMENT IS TO make healthcare and benefit programs work better for everyone, for ourselves, parents, children, society and our economy
Administrative and health information technology costs are high in the U.S and other health care systems around the world. IT systems that run the growing number of administrative functions continue to become more cumbersome and costly.

There are numerous documented facts that show the current health information technology infrastructure has become less interoperable and unable to deal with the increased demand by both providers and consumers of health care services.

All these factors lead to an increasing share of total health care spend being allocated to core administrative functions. That’s where Solve.Care comes in as a solution to many of the problems associated with health care administration and the wide range of functions required to administer health benefits in a seamless and cost effective manner with greater efficiency.

It is reliably estimated that costs for healthcare administration range from 7% to over 30% of total healthcare spending, as a direct result of inefficient processes, data system silos and duplication of effort.

Market Challenge and Opportunity

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Health expenditure, total (% of GDP)

<table>
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Solve.Care platform can perform the tasks of current processing and management systems at 3% of total spend through the use of Care Administration Networks thus reducing processing and management of systems and the potential to reduce overall spend.

We estimate that the addressable market size is in excess of $100 billion for the U.S alone and billions more in other health care systems around the world.

Solve.Care has become possible by combining decades of experience and domain expertise in insurance systems, government programs, clinical management, care coordination and employee benefits administration with recent technological innovations such as a Blockchain, smart contracts, machine learning, behavioral, clinical and transactional analytics.

The growth of Blockchain technology is the paradigm shift in health care that will allow for true coordination of care administration that the Solve.Care platform can achieve.
Inefficiency of healthcare administration

Most of healthcare around the world is managed via the 3rd party model of administration and payment. This model results in patient going to see the doctor and a 3rd party (insurance, employer or government) paying the bill.

The U.S. Spent $3,205.6 Billion on Health Care in 2015

- 32.3% $1,036.1 Hospital Care
- 15.7% $502.8 Physician services
- 14.8% $476 Other personal health care
- 10.1% $324.6 Prescription Drugs
- 6.6% $210.1 Net cost of health insurance
- 4.9% $156.8 Nursing care facilities
- 4.8% $154.7 Investment
- 4.1% $132.1 Clinical services
- 2.8% $88.8 Home health care
- 2.5% $80.9 Government public health activities
- 1.3% $42.6 Government administration
Inefficiency of healthcare administration

3rd party model of administering benefits is very complex to manage and very expensive because of these facts:

1. **Centralized systems and information silos**

   Things would work well when there is effective coordination between all 3 parties but that does not happen. Each party has different teams, systems and processes that don’t easily connect with the other party systems and processes. So, a lot of time and incredible amounts of money is spent each year on coordination and communication but it remains imperfect and keeps getting more complex. These system and data silos result in 15-25% of all money spent of benefits to be spent on IT, administrative processes and duplication of effort. And due to high latency, they are terribly ineffective in preventing fraud, waste and abuse.

2. **Poor coordination and lack of integration**

   Person receiving the benefit (service or product), person delivering the benefit and person paying for that benefit, are different. You go to the doctor and receive care but insurance company is responsible for paying the doctor. So, instantly there is a triangular relationship that is difficult to manage in the best of circumstances. When you add in the fact that most systems are not designed to effectively talk to other systems, the act of coordinating and managing benefits across multiple parties becomes an impossibly expensive and time consuming task.

3. **Disintermediation of the consumer**

   Insurers, hospitals, labs, and pharmacies, all use complex, centralized logic to make decisions and you are excluded from that process. Most systems are designed to serve the consumer but in practice have distorted into treating you as a beneficiary not a decision maker. We are all excluded from the process that determines much of cost and outcome because we lack the capability of processing all the complex logic and the arrangements.

SolveCare platform is designed to replace centralized systems and duplicative administrative processes with a decentralized and synchronized model of administration that is highly efficient and effective for patients, care providers and administrators alike.
Current model of care coordination is complex, time consuming and frustrating

Current model of care coordination requires considerable manual effort from all parties, starting with patients and extends to doctors, eligibility workers, case managers, billing agents, reviewers, auditors and many more. A consumer needs a Ph.D. in healthcare finance to figure out the process and many with an actual Ph.D. cannot. This approach needs to change.

1. Call insurance company to get deductible and coverage information
2. Download provider directory from insurance company website
3. Find suitable doctor
4. Call for availability and schedule appointment
5. Collect past medical records and prescriptions
6. At the doctor’s office, sign multiple consents
7. See doctor, get diagnosis, prescription, referral for specialist visit
8. Go to pharmacy to get medicine
9. Call to schedule lab test and specialist visit
10. Visit lab, get tested
11. Coordinate all parties and make sure everybody has all necessary information
12. Visit specialist with prescription, clinical records, lab results
13. Set up follow up appointment with the doctor
14. Go see the doctor for final diagnosis and treatment
15. Handle rain of bills from the doctor, lab and specialists
16. Decipher EOBs written in alien language to figure out how much you owe, to whom and why
17. Make payments from your FSA, HSA, HRA and personal accounts
18. Call insurance company to make sure deductible is properly adjusted

Solve.Care platform is designed to completely redesign and automate this process using Care.Wallet, Care.Cards, Care.Coins and the synchronization power of Care.Protocol
Solve.Care Platform is a revolution of care, cost and convenience

Solve.Care is a decentralized and distributed platform for administration of healthcare and benefits programs. The platform addresses the core need of coordinating all parties and communicating all relevant events and circumstances by using a decentralized approach that delivers all relevant information and conditions to the right party exactly when needed.

The platform consists of Care.Wallet, Care.Protocol, Care.Coin and Care.Card that offer a highly innovative approach to administering benefits and keeping all parties in sync without the need for a centralized record keeper.
Connects and synchronizes wallets, cards and coins between stakeholders, to coordinate care and automate transactions in a revolutionary new approach.

Care.Wallet
Care.Wallet is designed as blockchain app to help providers and patients communicate and manage care delivery. Care.Wallet houses Care.Cards and Care.Coins that put the consumer in full control over information and actions. Care.Wallet and Care.Cards automatically sync with other wallets, resulting in real time coordination across all stakeholders.

Care.Cards
Purpose built applications that can be linked, stacked and synchronized, to deliver unprecedented capability and ease of usage to all stakeholders.

Care.Coin
Intelligent payment token that brings accountability, transparency, proof of service/authorization and immutable replay to healthcare and benefit transactions. Our coin is designed to simplify payments to providers.

Care.Vault
Data management module of Care.Protocol to organize data within the platform and from external systems in a uniquely powerful but simple manner.

Care.Protocol
Connects and synchronizes wallets, cards and coins between stakeholders, to coordinate care and automate transactions in a revolutionary new approach.
Care.Wallet

Care.Wallet is a personal healthcare wallet and application container that is connected with other wallets on the network via Care.Protocol. Care.Wallet learns user preferences and holds intelligent applications called Care.Cards and Care.Coins. Care.Wallet can automatically synchronize with other wallets and can coordinate and manage of healthcare transactions and records.

Care.Wallet is designed to help providers and patients communicate and manage care delivery.
Care.Card

Care.Cards are portable applications that reside in the Care.Wallet. Care.Cards are equivalent to apps in an app store that can be downloaded from the Care.Marketplace. However, unlike generic apps, Care.Cards have access to all the platform constructs including Care.Protocol Pairs, Care.Coins, Care.Vault etc.

Care.Cards represent an incredible opportunity to build intelligence into the platform to automate healthcare administration, effectively coordinate care between multiple stakeholders, handle complex billing transactions and deliver personalize information to the wallet holders.

Care.Cards have unique capabilities that make them a powerful tool of intelligent automation:

- Automatic synchronization with other cards
- Require no centralized logic processor
- Intuitive data security model of public and private side
- Care.Cards can be published for a specific protocol pair to follow the rules of that pair
Care.Coin

Care.Coin is an intelligent healthcare payment currency designed to reduce cost of healthcare administration and reduce fraud, waste and abuse. Care.Coin is designed to support a relationship centric model of payment and automatically inherits the relationship rules for the transaction. Care.Coin can verify and enforce relationship rules in real time during payment lifecycle.

Care.Coin brings Proof of service model to healthcare. Proof of service is a score of events in the Blockchain ledger to establish evidence of service delivery and can be computationally determined based such events: Schedule, consent, diagnosis, prescription, lab, referral, follow up etc.

Care.Coin represents a new way to detect abuse by automatically computing proof prior to payment. For example, an insurance company can use Proof of service in conjunction with billed amount and past billings to easily determine if the bill needs to be reviewed further prior to payment.

Care.Coin enables escrow based payments and can automatically release monetary value upon sufficient proof of service. Care.Coin can remove much of the friction, cost and risk from 3rd payment model.

Summary of key characteristics of Care.Coin:
- Stable monetary value
- Guaranteed redemption
- Adjustable administrative cost components
- Immutable audit trail
- Access control
- Proof of service
- Automated escrow and release

Care.Coin has the potential to fundamentally change healthcare payments and remove the friction from 3rd party payment model.
Care.Vault is the data management module of Care.Protocol and is uniquely powerful way to handle data within the platform and from external systems. Care.Vault is also a content repository with ability to link and aggregate payload, structured data and blockchain ledgers. Care.Vault provides a way to logically organize data between protocol pair entities, regardless of origin and format of the data.

Care.Vault organizes all data (local or referenced) into a hierarchy of vault instance, cabinets and records.

Care.Vault can be attached to any Care.Protocol.Pair and automatically inherits all the rules of the relationship between that pair. Using these relationship rules, Care.Vault can organize data and manage access to data by pair entities, similar nodes and the network as a whole.

Care.Vault automatically manages data using protocol pair rules of relationship, as illustrated below:

Care.Vault is an innovative approach for a distributed system to implement permissioned Blockchain and combine event data with legacy data and external system data.
Care.Protocol

Healthcare and benefit administration lifecycle typically involves several parties to participate. These parties collectively manage activity, manage costs, deliver proper care, ensure proper outcomes and maintain privacy of information and security of systems.

One of the biggest challenges is keeping all parties in sync and sharing the right information with the right party at the right time. For example, a doctor must bill the insurance company for services provided to the patient, but must not disclose all information about the condition and treatment, only as much as needed for insurance company to determine the cost.

Care.Protocol is the underlying fabric of the platform and handles all communication and synchronization between entities, wallets, cards, coins and client systems. Care.Protocol enables synchronization and secure communication between two entities defined as a protocol pair.

Using pair definitions such as Doctor-Patient, developers can easily publish cards that synchronize scheduling, manage consent, recommend treatment, issue pharmacy prescription, review lab results, send bill, receive accurate payment and schedule follow up.

Care.Community can develop new protocol pairs and publish them on Care.Marketplace.
Solve.Care Platform is for all stakeholders

**Individuals and families**

The platform will allow everyone to have access and control over all their information and actions in a simple and understandable manner. They can make appointments with a touch, share records with a swipe, compare prices, utilize all available discounts, manage prescriptions and interactions, view personalized care information, coordinate care among providers, make accurate payments and manage their benefits without getting a PhD in healthcare finance.

**Doctors and care providers**

Health care providers can reduce administrative burden, reduce liability and risk while delivering better care outcomes and actually focus on delivering care. They can easily publish their schedule, verify coverage and deductible, access appropriate and accurate records, handle consents, issue prescriptions and coordinate with specialists, labs and therapists. All without owning complex systems and spending hours on the phone with insurance companies.

**Employers**

All employers can now offer more robust benefit packages at a cost that is affordable. Using Solve.Care they can build own care administration network to rewards employees for healthy life styles, implement cost sharing models that encourage the right behavior, and administer benefits at a lower cost and without the need for expensive systems.

**Insurers**

Insurers can bend the cost curve via accountability, transparency, consumer engagement and elimination of waste. Insurers will benefit greatly from using Solve.Care platform to connect all stakeholders into care administration networks. Insurers can achieve incredible care coordination in real time, personalized preventative care and chronic disease treatment, automate and simplify case management. And dramatically improve provider relations and satisfaction from accurate and timely payments.
Developers and services providers

All employers can now offer more robust benefit packages at a cost that is affordable. Using Solve.Care they can build their own Care Administration Network to rewards employees for healthy life styles, implement cost sharing models that encourage the right behavior, and administer benefits at a lower cost and without the need for expensive systems.

Government agencies

Health care agencies will be able to finally gain control over administrative and IT costs, by replacing rigid, expensive system silos with flexible, transactional Care Administration Network. Agencies can finally keep pace with changing policy via easily modifiable contracts and highly configurable relationships. Government agencies can focus on their core task of serving the needs of their population instead of being forced into the business of managing IT vendors and systems.

Administrators and brokers

The platform will be able to automate and eliminate repetitive tasks with intelligent Care.Cards for better experience for everyone. Market participants can build and operate their own Care Networks for employers and employees, offer incredible self-service capability, integrate cutting edge benefits, personalize information for every citizen/employee and reduce cost of call centers, processes and centralized systems.
Clients can configure own care administration networks

WHAT IS A CARE ADMINISTRATION NETWORK?

Care Administration Network is an ecosystem that connects all parties involved in the administration and coordination of a healthcare benefit program. Clients such as insurance companies, government agencies, hospitals, provider networks, employers and benefit administrators, can create own care administration network using Solve.Care platform.

Care Administration Network connects all members in the eco-systems in real time. Care administration network is designed to automate most administrative processes while delivering real time coordination of care and benefits.

The advantage of such a Care Administration Network is reduction in administrative costs; real time and more effective care coordination; elimination of duplication of services; reduction in fraud, waste and abuse of the program; and empowering the consumer with access and control over their information and decisions. Members of the network use Care.Wallet to communicate and synchronize their activities with each other in a highly efficient manner. Member wallets can contain the necessary Care.Cards for access to appropriate information and ability to take action.

All members in the network are connected and automatically synchronized with each other by the underlying Care.Protocol which is built using Blockchain distributed ledger technology. Care Administration Network can be open, closed or a hybrid that connects to another network for specific purposes.
Different Configurations of Care Administration Networks

Example of a Care Administration Network of a Health Insurance Company

We have calculated that the decentralized approach of Solve.Care platform can reduce the cost of administration of certain programs from 30% to 3%, and improve health and lives of people around the world.

Government agencies can effectively manage care and benefits for the elderly, blind, disabled, pregnant women, and those needing assistance with mental health and substance abuse.
Consent cards allow exchange of consent for treatment, records, billing, payment, emergency, compliance and many more scenarios requiring consent. Consent cards don’t need centralized storage and can be made public or kept private between the pair and selectively shared with other stakeholders in the ecosystem by the consent provider.

Scheduling cards bring ease of usage to citizen when trying to find a physician based on proximity, language, gender and availability and automate schedule changes, switching to alternative care provider and more.

Treatment cards organize treatment information, diagnosis, emergency procedures and can link to lifestyle cards to manage diet, exercise, sleep, stress etc. Public side of treatment card stores information that is needed by other stakeholders and private side contains treatment data that is shared only between the pair entities.

Prescription cards are used for sharing and managing order, refill, dosage, drug interactions, formulations and much more. Prescriptions cards can synchronize with treatment, insurance and other cards.

Laboratory cards are used to manage laboratory results, comparison with other card, trend analysis and for coordination of care between patient, doctor, specialist and other stakeholders.

Referral cards are powerful agents of synchronization of care and link to other cards such as authorization, records and scheduling.

Record cards are organized into deck of cards by type, episode, provider, and timeframe and provide access control and history of all prior access. Record cards are powerful way for a consumer to access and manage records that are spread across multiple EMR/EHR.

Bill cards are designed to automate and organize billing and payment information between doctor-patient pair and automatically synchronize with insurer-patient and insurer-doctor pair.

Payment cards help card holder decide on what to pay, whom to pay and ensure that proof of service and proof of verification has been logged, prior to payment. Payment cards are powerful tool of control and transparency in the entire billing and payment process of healthcare and benefit administration.
Solve.Care Platform Design

Solve.Care platform is based on a hybrid architectural approach that includes a distributed ledger, authorized entity model, event based architecture, stateless transactions, service orientation, loose coupling, stateful relationships, tiered data model and protocol encryption.

PLATFORM DESIGN PRINCIPLES

Solve.Care platform architecture adheres to the following design principles and constructs:

- **Distributed immutable ledger**: for tracking and managing all events in the ecosystem
- **Synchronization protocol**: real time event based synchronization
- **Inheritance**: ensure multi-tier inheritance of properties
- **Encapsulation**: protocol pairs encapsulate all elements of relationship between parties
- **Application container**: End user application with defined usage
- **Application linking**: linking of Care.Cards and wallets for coordinated network capability
- **Edge applications**: that inherit the container and protocol properties
- **Extensible data model**: can be extended for new entities, pairs, events, logic and domain
- **Loose coupling**: avoid point to point integration and replace with event based integration
- **Standards**: ability to configure physical, network and data layer to comply with applicable
Solve.Care Platform Architecture

KEY PLATFORM COMPONENTS

- Care.Wallet Application container
- Card Stack
- Coin Pile
- Care.Protocol
- Event Ledger
- Event Handler
- Identify and Access Management
- Smart Contract Library

- Data Hub
- Care.Vault, Care.Cabinet & Care.Record
- Care.Marketplace
- Integration layer
- Distributed Processing nodes
- Network Topology Manager
- Open API and services
Care.Protocol Design

INNOVATIVE COMBINATION OF BLOCKCHAIN AND EVENT MANAGEMENT

Care.Protocol is the foundation for the event based approach and is designed to deliver events to all parties to whom event is of interest. Each entity can read an event by pairing with an entity, subscribing to an event and accessing an event ledger. Access to events is based on public-private hierarchy with all events that are stored in Blockchain ledger. Care.Protocol is built using event based architecture and manages events between all components of the platform and between physical and logical entities. It is a proprietary event handling protocol to organize event hierarchy and event flows.

PROTOCOL.PAIRS

Protocol.Pairs is a powerful innovation to make decentralized administration of healthcare and benefit administration possible. Care.Protocol creates an organization model of entity pairs called Care.Protocol.Pairs. Care.Protocol allows each entity in a pair to have a 32-digit protocol ID and using the protocol ID, entity registers on the network to form protocol pairs. They “sign” a contract that binds them to rules of relationship with Wallets, cards, coins, endpoints which are then governed by pair rules. A protocol pair captures all elements of the relationship. Protocol pair definition is kept in the Blockchain and is contract between parties. Each pair is also bound to a smart contract on the Blockchain.

Care.Protocol.Pair encapsulates all elements of relationship between two stakeholders as follows:

- Content, transactions and formats
- Rules and constraints
- Public and private data
- Synchronization
- Consent and proof
- Audit and compliance
- Security and access control
**PRE-DEFINED PROTOCOL PAIRS**

<table>
<thead>
<tr>
<th>Protocol Pair</th>
<th>Pair Event</th>
<th>Pair B</th>
</tr>
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<tbody>
<tr>
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<td>Application</td>
<td>Benefit enrollment</td>
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<tr>
<td>Agency - Citizen</td>
<td>Premium collection</td>
<td>Life events and changes</td>
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**PROTOCOL PAIR EVENTS**

Protocol pairs can support multiple event types and related permissions defined by event originator.

- **Pair event** is published to specific entity you are paired with. Pair event is automatically visible to both entities in the pair but no one else in the network.
- **Group event** is published to a group of pairs and can be accessed by entities in those pairs.
- **Network event** - published to all pairs and is accessible to all entities in the network. However access to event payload is strictly based on access.

Events can be grouped into:

- Pair event is published to specific entity you are paired with. Pair event is automatically visible to both entities in the pair but no one else in the network.
- Group event is published to a group of pairs and can be accessed by entities in those pairs.
- Network event – published to all pairs and is accessible to all entities in the network. However access to event payload is strictly based on access.
EVENT PROPERTIES

- Delegated events – event authorized for publishing to a delegation (non-pair)
- Subscribed events – events can be read from the distributed ledger directly

Events have one primary and can have multiple secondary tags to capture:

- Access rights
-Transaction reference
- Control information
- Query-Response information
- Admin information
- Additional tags can be defined and are visible to protocol pair entities
- Access to tags beyond paired entity can be controlled

EVENT HANDLER

Events are a key construct of Solve.Care platform. Event handler has the ability to track all events in an immutable ledger, ability to separately manage events versus payload, store events in Blockchain versus payload and separately manage access to events versus payload. Here is an illustration of how event handling is done via Care.Protocol.
PROTOCOL.ENDPOINTS

Care.Protocol Endpoints are connection and synchronization points for external systems. They are designed to support stateless and stateful interaction with external systems, using appropriate transport protocols. Care.Protocol.Endpoints can be built for synchronization with clinical, eligibility, enrollment, financial, care and case management, and government systems. Care.Protocol.Endpoints can support any encryption and network protocol security standard that is appropriate and required. Care.Community can publish new endpoints to address specific requirements dictated by external system, regulations and standards.

DATA MODEL

Solve.Care data model is a key determinant in achieving a flexible, expandable and evolving platform for benefit administration across the globe. The data model follows the decentralized design of the overall solution approach and is expandable by the community. Solve.Care data model supports decentralized entities that publish data to remain in sync with each object having a defined linking and data syncing definition. This approach makes it very flexible, powerful and expandable with protocol pair's encapsulation of pair intelligence and transactions.

CARE.WALLET SERVICES

Care.Wallet publishes a number of microservices for access by Care.Cards and Care.Coins

- Identity services
- Protocol services
- Data services
- Device services
- Subscription services
- Personalization services
- These services are abstracted for ease to use and compatibility with multiple devices

Community/clients can leverage these services to publish intelligent cards and manage coins.

CARE.CARD ACTIONS

Each card corner can be associated with actions:

- Link card to other cards
- Flip between public and private side
- Share card with another entity/wallet
- Control permissions and access
- Search card or deck
- Custom action defined by card developer
SMART CONTRACT LIBRARY

Solve.Care platform uses Smart contracts to implement business logic specific to Care.Protocol pairs.

- Pair-specific business logic defined by smart contracts
- Smart contract can invoke another smart contracts
- Administrative and payment relationship between an entity pair can be controlled via smart contract attached to that pair

Contract Types

- Access contracts
- Data collection and use contracts
- Privacy and security contracts
- Consent contracts
- Compliance contracts
- Subscription contracts
- License contracts
- Permitted use contracts

Examples of Protocol Pair Contracts

Insurer ↔ Provider
- Credentialing contracts
- Pricing contracts
- Performance contracts
- Payment contracts

Insurer ↔ Insured
- Eligibility contracts
- Enrollment contracts
- Utilization contracts
- Payment contracts

SECURITY AND PRIVACY

A key concern with any health benefits system is once of privacy. Benefit information is very sensitive and governed by numerous regulations, standards and security considerations. In many ways, the argument and justification for current silos of centralized systems is based on the need to secure consumer and health data and compliance with relevant rules.

Solve.Care is designed to improve the security and privacy while also improving access and accountability in a manner that current centralized systems cannot accomplish. Every transaction that happens in Solve.Care is immutable, instantly verifiable by all authorized parties. Solve.Care is designed to work with existing protocols, standards and formats of data while adding a decentralized audit trail for all events that occur at application and protocol level. Solve.Care protocol is expandable and serves as an envelope in which content in any format can be safely delivered to the right party for the right duration. Clients and community can expand the Solve.Care security model to address the needs of privacy and portability of data and still leverage their existing and planned security frameworks.

ENABLING TECHNOLOGIES

Solve.Care platform uses a number of innovative technologies including Blockchain for distributed ledgers and immutable audit; smart contracts for encapsulating pair relationships; extensible application container; embedded data management; embedded identity and access management; embedded machine learning; and embedded behavioral analytics. Solve.Care will be built using the Ethereum Blockchain protocol.
Solve.Care is a platform of Care.Community

Solve.Care platform is designed to expanded and extended by the Care.Community, clients and partners.

Care.Community will drive adoption and generate revenue by publishing innovative Care.Cards for a wide range of functionality from diabetes care to forecasting utilization to fraud analytics and much more that cannot even be imagined today.

Care.Community can extend the platform by publishing new protocol pairs, endpoints, Care.Cards, Proof of service computational models and analytical models. These innovations cards will be published on Care.Marketplace and generate recurring revenue for the publisher.

Platform Extensibility by Care.Community

- Data model
- Protocol pairs
- Protocol endpoints
- Care.Wallet container
- Care.Wallet services
- Payment models
- Proof of service calculation
- Security and access control
- And much more

Care.Community is incentivized and supported to continuously innovate and accelerate the adoption of Solve.Care platform around the globe.

Care.Community is actively managed and supported by several dedicated community managers to create widespread participation and foster constant innovation through events, projects and rewards.

Care.Community will receive bounties from reserved tokens for the specific purpose of growing the community, extending the platform and adapting the platform to different healthcare models around the world.
CARE.MARKETPLACE

Care. Marketplace is the app store for Solve.Care platform for extensions, cards, endpoints, pairs and services.

It is the place where community connects with the clients and generates revenue from published innovations and expertise. New platform extensions, protocol pairs, cards and models will be constantly added to community marketplace, based on evolving needs of consumers and industry.

Care. Marketplace allows domain experts to package their knowledge and expertise into platform extensions and Care. Cards.

It is possible to publish a card that is as relevant to a diabetic patient in India as in Indiana. Care. Community will also use the Care. Marketplace to publish services such as training and certifications, standards and compliance, integration and professional services, best practices and more.

The possibilities for innovation, revenue generation and positive social impact are limitless.
Solve.Care Platform Revenue

Solve.Care platform revenue is collected in SOLVE and can be organized into four categories:

1. **Clients** – insurance companies, government agencies, integrated delivery networks, employer
2. **Subscribers** – patients, employees, beneficiaries, consumers, case managers
3. **Partners** – resellers, processing partners, integrators, cloud vendors
4. **Marketplace** – Care.Marketplace transactions revenue share

<table>
<thead>
<tr>
<th>Client revenue</th>
<th>Subscriber revenue</th>
<th>Marketplace revenue</th>
<th>Partner revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Platform fees for license, subscriptions, transactions and processing</td>
<td>Subscription fees for wallet and cards directly paid by subscriber or sponsors</td>
<td>Revenue from community offerings on the marketplace is shared between publisher and Solve.Care Foundation</td>
<td>Certain markets will require Solve.Care platform to be used inside an existing eco-system</td>
</tr>
<tr>
<td>Services fees for configuration, extension and integration</td>
<td>Transaction fees for payments and other fee based actions</td>
<td>Community published pairs, end-points, cards and apps will generate recurring revenue</td>
<td>Custom configurations and revenue sharing models with applicable eco-system partners</td>
</tr>
</tbody>
</table>

There are thousands of healthcare companies and potentially millions of subscribers that can benefit from the capabilities of Solve.Care platform.
SOLVE Token Distribution

SOLVE is a limited supply token

- 35% 350M CAN tokens offered (via pre-sale and sale)
- 20% 200M Community
- 18% 180M Reserved for team
- 15% 150M Growth & acquisition
- 9% 90M Long term foundation budget
- 3% 30M Token Sale Expenses

- Solve.Care Foundation has issued a total of 1000 million SOLVE tokens
- No more SOLVE tokens will be issued
- 350 million SOLVE tokens will be offered via Pre-sale and Token sale
- 650 million tokens are reserved for team, foundation and community
- Unsold tokens will be burned
Reserved Token Vesting Schedule

Vesting schedules are typically used to focus and reward the executives and team for growing the company and platform. Vesting schedules are a fair and transparent method to reward the team incrementally, instead of all upfront or all at the end.

- 650 Million SOLVE tokens are reserved for the Solve.Care team, advisors and early supporters
- The reserved tokens will be allocated at the sole discretion of the governance council
- The reserved tokens when allocated are subject to the vesting schedule below
- Vesting schedule begins from the date Token sale completion
- Reserved tokens cannot be sold at a discount to issuance price

**RESERVED TOKEN VESTING TERMS**

<table>
<thead>
<tr>
<th>Role</th>
<th>Vesting Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executives and Team</td>
<td>20% every 6 months, 100% vesting at 30 months</td>
</tr>
<tr>
<td>Advisory Board Members</td>
<td>50% at 12 months and 100% at 24 months</td>
</tr>
<tr>
<td>Consultants and Partners</td>
<td>50% at 6 months and 100% at 12 months</td>
</tr>
<tr>
<td>Early supporters</td>
<td>100% at completion of Early Adopter and Regular sale</td>
</tr>
</tbody>
</table>

**HOW VESTING WORKS**

A team member who has been granted 1000 SOLVE tokens with a vesting schedule of 20% every 6 months, will receive 200 tokens at each of the 5 vesting events, over a period of 30 months
Use of Proceeds
Planned use of proceeds has been reviewed and approved by the Solve.Care Governance council as follows:

- **31%** Development
- **25%** Subscribers and acquisitions
- **16%** Community and partner eco-system
- **12%** Sales and marketing
- **9%** General and administrative
- **3%** Legal and compliance
- **2%** Infrastructure and project management
- **2%** Token Sale
SOLVE Tokens vs. Care.Coins

SOLVE token is needed for wallet subscription, card subscription and using of Care.Coin for payments.

Care.Coin is an intelligent healthcare digital coin designed for transparent, accurate and verifiable payment of healthcare services between members of a care administration network. It does NOT vary in value and is backed by reserves of the currency it is pegged. Care.Coin cannot be traded on crypto-exchanges and is not limited in supply.

### COMPARISON OF CAN AND CARE.COIN

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>SOLVE Token</th>
<th>Care.Coin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Variable value</td>
<td>✔</td>
<td>X</td>
</tr>
<tr>
<td>Tradable on crypto-exchanges</td>
<td>✔</td>
<td>X</td>
</tr>
<tr>
<td>Care.Marketplace purchasing</td>
<td>✔</td>
<td>X</td>
</tr>
<tr>
<td>Tradable p2p</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Fractional Amount</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Available worldwide</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Pegged to fiat currencies</td>
<td>X</td>
<td>✔</td>
</tr>
<tr>
<td>Managed and exchanged via Care.Wallet</td>
<td>X</td>
<td>✔</td>
</tr>
<tr>
<td>Care Administration Network payments</td>
<td>X</td>
<td>✔</td>
</tr>
<tr>
<td>Backed by reserves</td>
<td>X</td>
<td>✔</td>
</tr>
</tbody>
</table>
Solve.Care Product Roadmap

Solve.Care team has adopted a mature product governance model used by some of the most successful software companies in the world. It includes a dedicated product management council responsible for active management of the product roadmap and dedicated product architecture council for active management of Solve.Care platform architecture.

PRODUCT VERSIONS AND RELEASE MANAGEMENT

- Major product releases are scheduled every 6 months
- For ease of management, major product releases are aligned to calendar quarter
- Minor product releases are scheduled every 6 weeks
- Patch release are done as needed, and are primarily used for emergencies
- Sequence of releases Major – minor – minor – minor – Major
- Approved release naming convention is - MMM.mmm.ppp

ROADMAP MANAGEMENT GUIDELINES

- Product roadmap management is aligned to calendar quarters
- Next quarter product roadmap must be published during current quarter
- Next quarter roadmap must be approved no later than week 8 of current quarter
- Roadmap allocates available engineering capacity for the quarter as follows
  - 77% of available capacity for roadmap related activity
  - 23% reserved for minor releases/emergency patches
- 5 releases have been scheduled per PMC meeting on 6/30/2017

Detailed requirements from the clients were reviewed on 12/20/2017. Updated roadmap has been published as below.
RELEASE SCHEDULE

1  RELEASE 1 (Q2 2018)
   1.1 - Client deliverable
      • Provider reward program
   1.2 - Client deliverable
      • Pre-authorization for medical services
      • Specialist care referrals
   1.3 – Platform enhancement
      • Provider Care.Wallet
      • Community project framework

2  RELEASE 2 (Q4 2018)
   2.1 - Client deliverable
      • Patient – Provider direct scheduling
   2.2 - Client deliverable
      • Patient – Provider direct payments
   2.3 – Platform enhancement
      • Patient Care.Wallet
      • Community extensible Care.Protocol
      • Governance, Risk and Compliance (GRC)

3  RELEASE 3 (Q2 2019)
   3.1 - Client deliverable
      • Insurance ID card with built-in plan benefits
   3.2 - Client Deliverable
      • Delegated provider payments via Care.Coin
   3.3 – Platform enhancement
      • Care.Marketplace
      • Community published Care.Cards
RELEASE SCHEDULE

4

RELEASE 4 (Q4 2019)

4.1 - Client deliverable
  • Employee reward programs

4.2 - Client deliverable
  • Employer sponsored payments via Care.Coin

4.2 - Client deliverable
  • Employer sponsored payments via Care.Coin

4.3 - Platform enhancements
  • Community published end-points

5

RELEASE 5 (Q2 2020)

5.1 - Client deliverable
  • Dangerous drug interaction

5.2 - Client deliverable
  • Diabetes self-care

5.3 - Platform enhancements
  • Machine learning API for Care.Wallet and Care.Cards
  • Government program compliance

6

RELEASE 6 (Q4 2020)

6.1 - Client deliverable
  • Case management
  • Utilization analytics

6.2 - Client deliverable
  • Care management
  • Behavioral analytics

6.3 - Platform enhancement
  • Government program compliance
Governance

CORPORATE GOVERNANCE

Solve.Care takes corporate governance very seriously. We have adopted a governance model that is adapted from decades of experience in working in companies small and large, public and private, in healthcare and finance. Please review the detailed Governance Our Governance approach is implemented via a set of councils responsible for specific areas of corporate functions. The diagram below provides a bird’s eye view of the governance structure of the company.

The 5 guiding principles for the Governance Council are:

- Transparency
- Accountability
- Value creation
- Fairness
- Efficient use of capital

GOVERNANCE COUNCIL

Serves as main governance body of the Solve.Care foundation and is responsible for unanimous consent decisions, majority consent decisions, appointments and replacements.

Governance council consists of Chief Executive Officer, Chief Operating Officer, Chief Technology Officer, Chief Financial Officer and independent member, who is appointed annually. Chairman of the council is appointed by general shareholder meeting.

Governance council shall have weekly calls, monthly meetings and quarterly summits. Audits are held by Chief Revenue Officer and Chief Marketing Officer.
TECHNICAL GOVERNANCE

Solve.Care team has adopted a mature product governance model used by some of the most successful software companies in the world. It includes a dedicated product management council responsible for active management of the product roadmap and dedicated product architecture council for active management of Solve.Care platform architecture.

PRODUCT MANAGEMENT COUNCIL (PMC)

Product Management Council is responsible for roadmap creation, review, publication, approval and updates. PMC is required to actively manage roadmap for current quarter and plans for next quarter.

Product management council meets monthly and is co-chaired by company CEO and CTO. PMC shall publish meeting notes within 7 days after appropriate editing for confidentiality and the notes be shared with community and clients.

Product Management Council composed of following functional representatives:
PRODUCT ARCHITECTURE COUNCIL (PAC)

Platform Architecture Council is responsible for the architecture and design of the platform in terms of sustainability, scalability, security, extensibility and ease of usage.

PAC approves the technical design and specification leading to development sprints. PAC is also responsible for conducting research on emerging technologies and authorizing proof of concept projects to determine applicability of new technologies to Solve.Care platform. PAC must approve new technologies before they can be incorporated into Solve.Care platform. PAC shall publish meeting notes within 7 days after appropriate editing for confidentiality and the notes be shared with the community.

**PAC is chaired by CTO of the company and composed of following functional representatives:**

- Community
- Dev-ops
- Professional services
- Development
- Delivery and integration
- Support

CTO
STRATEGIC ADVISORY BOARD

Board of advisors is non-executive body of the corporate governance and consists of 5-7 board members who are appointed annually via general shareholder meeting. They are compensated for growth of company revenue and value. Compensation package adjusted to skill, participation and company revenue stage.

Advisory board provides executive team with advices on strategy for market positioning, competitive threats, opportunities, good governance and capital markets. The meetings are held monthly and take 1-2 hours. All the advisors also have ambassador status at the annual conference.
Compensation committee is responsible for setting executive compensation via majority consent. It is responsible for compensation market analysis and fair comparison while taking into account company stage, absolute and comparative performance and specific demands of the role.

Compensation committee meets as needed and is scheduled to meet twice a year to review executive and management compensation matters and bring them in line with market, company performance and operational requirements.
Care Administrative Network (SOLVE) Token

SOLVE token is needed for wallet subscription, card subscription and using of Care.Coin for payments.

WHAT IS SOLVE USED FOR

SOLVE is needed for Solve.Care platform license, Care Administration Networks, processing fees, wallet subscriptions, Care.Card subscriptions and marketplace purchases:

- Platform License Fee
- Care.Wallet Subscription
- Care.Card Subscription
- Care.Protocol.Pairs
- Care.Protocol.Endpoints
- Proof of service model
- Transaction Processing Fees
- Processing Node Fees
- Professional Services

DEMAND FOR SOLVE TOKENS

There are many use case that include administration, coordination and payment transactions for public programs in the U.S including Medicare and Medicaid, private health insurance companies, hospitals, physicians and many other healthcare delivery stakeholders.

We estimate that the addressable market is in excess of $100 billion for the U.S alone and billions more in potential in other health care systems around the world. A simple example, pharmacy benefit management administrative costs are estimated at over 10% of the total spend of $354 Billion in the U.S last year. Solve.Care platform can redefine pharmacy benefit management at a fraction of cost being spent today.
Leadership

Pradeep Goel, CEO
Pradeep has deep expertise in health and human services, finance and technology. He has been in the CEO, COO, CIO and CTO roles at various innovative technology companies for more than 25 years. Pradeep was deeply involved in designing and building solutions for several public programs such as Medicaid, Children health insurance, Medicare, SNAP, TANF, mental health and many others. He has worked for and with insurance companies, employer sponsored benefits and US government programs related to healthcare, benefits and financial administration.

Vadym Vorobiov, CTO
Vadym’s entire career in software development has been related to product design, development and adoption. He spent more than a decade in the Health and Human Services sector building and deploying enterprise systems for government and commercial organizations. Since 2004, Vadym’s primary focus has been to deliver products and solutions which bring value to clients and citizens. He is applying his disciplined approach to product management and sustainable solution design to manage the Solve.Care solution roadmap.

David Randall, Ph.D. – Senior Policy Advisor
He is the Resident Scholar with the American Research and Policy Institute in Washington, DC. Dr. Randall has extensive experience as a former top insurance regulator, legislative staff member, healthcare lobbyist, consultant and executive with not only insurance companies, but also with several provider trade groups in Washington. He is the author of over two dozen peer-reviewed journal articles, book chapters and commentaries with subject matter expertise in health care entitlements, health information technology and health care financing systems.

The Honorable James Moran – Strategic Advisor
James Moran served as the U.S Representative for the 8th congressional district of Virginia from 1991 to 2015. During his tenure in the U.S. Congress, Mr. Moran focused heavily on technology issues and was inducted into the American Electronics Hall of Fame. While in Congress, he was a senior member of the House Appropriations Committee, served as chairman and ranking member of the Subcommittee on the Interior and Environment, was a senior member on the Defense and Military Construction Subcommittees, and served as a member of the Steering and Policy Committee for the House Democratic Leadership. Congressman Moran’s service on the Solve.Care Strategic Advisory Board will enormously assist the company to meet the goals we have established for the platform.
Donald Upson – Strategic Advisor
He is the former Cabinet Secretary of Technology for the State of Virginia. Mr. Upson is President of Cyberforce, a MSSP and reseller of the world’s most advanced endpoint antivirus protection: Cylance Protect. Serves as Partner of Upson Technology Group, a company he founded that built and manages two exclusive programs of the government tech sector: CES Government (CESG) and the Government Business Executive Forum (GBEF).

Paul Brubaker – Strategic Advisor
Paul has more than three decades of policy and management experience focused on deploying innovative technologies in government and industry. He was appointed by President George W. Bush and confirmed by the Senate to serve as the second Administrator of the Research and Innovative Technology Administration (RITA) at the United States Department of Transportation and was also appointed by Virginia Governor Jim Gilmore to serve as Chairman of the Virginia Center for Innovative Technology.

Chris Peterson – Strategic Advisor
Chris Petersen has over three decades of experience in the health insurance industry serving as Vice President of Legal Affairs with the Health Insurance Association of America. He has extensive experience dealing with health insurance markets, privacy issues (HIPPA) health insurance reform implementation and has consulted with foreign governments on emerging health insurance markets and systems. He is currently managing principal with Arbor Strategies, LLC based in Washington and is a graduate of Georgetown University Law Center and Washington University in St. Louis, both with Honors.

Jack Friou – Strategic Advisor
Mr. Friou has extensive experience as a life and health insurance executive. Over the last 44 years, he has had a wide variety of career experiences with Aflac, based in Columbus, Georgia. His most recent position, for the last 18 years, was Senior Vice President, Director of Government Relations. In June of 2017, Aflac announced his retirement to make way for the next generation, and for his pursuit of other endeavors including his role as an advisor to the Solve.Care Foundation.

Kostya Grygoryev – Advisor
Mr. Grygoryev has a M.Sc. in Computer Science and Applied Mathematics from the Moscow Institute of Physics and Technology. He has more than 24 years in business of Software Engineering, IT management and technology industry leadership. Previously he served as CEO of Ukrsoft and Miratech, Director of EngagePoint. Kostya is a longtime investor in US healthcare technology firms (e.g. state and federal CMS solutions). Currently Kostya serves as a founder and COO of Additive Solutions. He has a strong track record in process, project and product management for software technology and solutions.
Theodore Waz – Advisor
Theodore is a serial entrepreneur innovating across AI, blockchain, smart-digital and data-in-motion cybersecurity, focused on transforming the healthcare, fintech, data science and cybersecurity industries. Waz is renowned as a global innovator and thought-leader providing technology solutions markets in the United States and internationally. Leading one of the top 10 Most Innovative Companies in 2016, Waz was able to achieve over $50 million in early funding, making it one of the most inspiring and influential startup success stories. Waz has held a series of senior and CxO positions at fortune 500 Companies and Marquis Health Systems to include United Health Group, WellPoint, Cleveland Clinic Abu Dhabi, and Mubadalla.

Jonathan Chou – Advisor
Jonathan Chou is a co-founder and CEO of Bee Token, a company that’s revolutionizing home-sharing via the use of blockchain technology. Chou will lend his expertise to Solve-Care as a member of the advisory board. Before founding The Bee Token in October 2017, Chou worked as an engineer for the global ride-sharing app Uber, serving as tech lead on fraud and machine learning in the company’s cyber security department. He also played a key role in rewriting the new Uber app using Apple’s Swift programming language.

Dr. Ashis Chawla – Advisor
Dr. Ashis Chawla is a physician and surgeon at St. Joseph’s Health Centre, as well as Cleveland Clinic Canada. He has an academic appointment in the Department of Surgery at the University of Toronto. He is a Diplomat of the American Board of Urology and a Fellow of the Royal College of Physicians and Surgeons of Canada. Dr. Chawla remains active in many leadership groups and committees including the Ontario Medical Association as Secretary, Section of Urology.

Artem Afian – Advisor
Mr. Afian is an attorney and managing partner of Juscutum Attorney Association which is distinguished by innovative approach in legal practice. He advocates for legalization of Bitcoins in Ukraine and is constant participant of working and initiative groups on drafting bills, resources for liberalization in the economy and protection of investments in Ukraine. Member of the Expert Council under the Committee for Informatization and Information Technologies of the Verkhovna Rada of Ukraine.

Andrey Zamovskiy, CEO Ambisafe – Advisor
Andrey Zamovskiy: the founder of Ambisafe. Andrey has been involved in cryptocurrency development since early 2010. Andrey has founded or took leading technical roles in multiple first of their kind projects, such as BitMerch (first bitcoin merchant service), HolyTransaction, Tether and several cryptocurrency exchanges, including orderbook.io.
Important Disclosures

Recently the U.S Securities and Exchange Commission have issued a number of findings and advisories about participating in Initial Coin Offerings. We believe it is important to address the concerns raised by the SEC and other international securities regulatory bodies and how the Solve.Care Token Sale will operate and focus on the application of Blockchain technology with the use of a digital token as means to facilitating our goals of technology development and deployment. We are of the opinion that the offering for the development of our technology is not subject to SEC guidelines and this Token Sale offering addresses the general concerns and due diligence issues raised by the SEC Bulletin in Initial Coin Offerings in Token Sale of June 25, 2017. (See https://www.sec.gov/oiea/investor-alerts-and-bulletins/ib_coinofferings).

The tokens have not been and will not be registered under the United States Securities Act of 1933, as amended (the "Securities Act"), and may not be offered or sold in the United States or to or for the benefit of US persons (as defined in Regulation S under the Securities Act) unless they are so registered, or an exemption from the registration requirements of the Securities Act is available. The tokens offered for sale (Care Administration Network SOLVE) are deemed to be a utility and will be used to purchase future services and software.

One such exemption allows the resale of tokens purchased for their own account and for investment purposes only by investors who (I) are not otherwise affiliated with the Solve.Care Foundation, (II) have been exposed for some time to the economic risks that ownership of tokens entails, and (III) are not part of the distribution of the tokens. Purchase of tokens does not mean you are vested with any rights for acquiring of securities under USA jurisdiction or other jurisdictions where it is not provided by applicable legislation.

Ownership of tokens serves only as the mean to enable usage and interaction with the platform if successfully completed and deployed and right to purchase software and services from the Solve.Care Marketplace. It implies that you (a legal or natural person) participate in crowdfunding process as contemplated by the Whitepaper. You are purchasing Tokens solely for the purpose of accessing and the use of the Platform, and supporting the development, testing, deployment and operation of the Platform, being aware of the commercial risks associated with the Solve.Care Foundation and the Platform.

Solve.Care Foundation is not liable for not strict following of the Product Roadmap. Product Roadmap is the best guess, but it may change. The Product Governance will review and adjust the roadmap every 6 weeks to make it relevant.
SOLVE.CARE
MISSION STATEMENT

Make healthcare and benefit programs work better for everyone...
For ourselves, parents, children, society and our economy